



The Michigan Organ & Tissue Donor Registry

Be one in a million!

Sign up today.

*Terri Lynn Land,
Secretary of State*

What is the Michigan Organ & Tissue Donor Registry?

The Michigan Organ & Tissue Donor Registry is a confidential, electronic database that documents your wishes regarding organ donation. It is available to authorized procurement-group personnel and hospital staff 24 hours a day, seven days a week. Gift of Life Michigan, which provides donor services and information statewide, maintains the organ donor registry.

How do I add my name to the donor registry?

It's easy! To add your name to the organ donor registry, simply fill out the attached, postage-paid enrollment card and drop it in the mail.

You may also add your name online. To enroll online, visit the Secretary of State Web site at: www.Michigan.gov/sos. If you enroll online, there is no need to mail the organ donor card.

Do I need to talk to my family about my decision to be an organ donor?

Yes, it is very important to discuss organ donation with your family. Keeping everyone informed will help avoid any confusion or delays and ensure that your wishes are carried out.

As the organ donor registry is available to hospital staff around the clock, it remains the timeliest and most convenient means of indicating your wishes.

You may also indicate your wishes by establishing a patient advocate, or through a will, document of gift, driver's license or state identification card. However, these methods *do not* place your name on the organ donor registry and are not always accessible at the time of your death.

For more information, call Gift of Life Michigan at 1-(800) 482-4881

Cover - from left to right

Front Row: Nick Ramon ~ kidney recipient
Katy Mather ~ heart recipient
Leslie Skinner ~ heart recipient
Back Row: Thomas Alfaro ~ his wife, Teresa, donated her corneas
Secretary of State Terri Lynn Land

To add your name to the Michigan Organ Donor Registry:

1. Please initial the line to the right.

Initial Here

2. Circle your birth month.

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

3. Complete the information below and mail.

First Name

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MI

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Last Name

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Street Number

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Street Name

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City

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State

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Zip

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Please remember to discuss organ donation with your family.
Keeping everyone informed will help avoid any confusion or
delays and ensure that your wishes are carried out.

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Fax completed form to 517/241-6852 or mail to:

GIFT OF LIFE
C/O MI DEPT OF STATE
PO BOX 30693
LANSING MI 48909-9523